# 2016 - 06 - 08 - 08 - 00076907

**FEC** FORM 3P

### REPORT OF RECEIPTS **AND DISBURSEMENTS**

BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE PRESIDENT

FEDERAL ELECTION

CONSTRUCTO

FUBLIC OBSCILTORE

CIVING

2016 JUN -8 AM 10: 54

	Office Use Only
1. NAME OF COMMITTEE (in full, type or print)	Example: If typing, type over the lines. 12FE4M5
May Afri Allante	zallonn Camperson
Smultel	
ADDRESS (number and street))  Check if different than previously	Streen John
reported. (ACC CTC) CITY	STATE ZIP CODE
2. FEC IDENTIFICATION NUMBER ► COS 70	3. THIS REPORT IS FOR Primary or General
4. TYPE OF REPORT (Choose One)	Check here if this is a Termination Report (TER)
Quarterly Reports:	Monthly Reports:
April 15 (Q1) October 15 (Q3)  July 15 (Q2) January 31 Year-End Report (YE)	Feb 20 (M2)       May 20 (M5)       Aug 20 (M8)       Nov 20 (M11)         Mar 20 (M3)       Jun 20 (M6)       Sep 20 (M9)       Dec 20 (M12)         Apr 20 (M4)       Jul 20 (M7)       Oct 20 (M10))       Jan 31 (YE)
Thirtieth day report following the General Election on	Twelfth day report preceding election on in the State of
Is this Report an Amendment?	
5. Covering Period 64 10 100 100 100 100 100 100 100 100 100	through OS OS OS
I certify that I have examined this Report and to the best of my kn	owledge and belief it is true, correct and complete.
Type or Print Name of Treasurer	· COMLON
Signature of Treasurer  Treasurer	Date 05 09 2010
NOTE: Submission of false, erroneous, or incomplete information may All previous versions of this form a	subject the person signing this Report to the penalties of 52 U.S.C. §30109. re obsolete and should no longer be used.
Office Use	

Г	•	
,	FEC Form 3P (Rev. 03/2011)	Page <b>2</b>
Д	Tite or Type Committee Name Rug of Committee Name Rug of Committee Name	Campara Commelta
Re	eport Covering the Period: From:	To: 05 09 7016
SU	IMMARY	. · · · ·
6.	CASH ON HAND AT BEGINNING OF REPORTING PERIOD	164.00
7.	TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 3)	12,140,00
8.	SUBTOTAL . (Lines 6 and 7)	1230900
9.	TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2)	
10.	CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 9 from 8	168.00
. 11.	DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P)	
12.	DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P):	
13.	EXPENDITURES SUBJECT TO LIMITATION	,
NE	ET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND	EXPENDITURES
<sub>,</sub> 14.	. NET CONTRIBUTIONS (Other than Loans)  (Subtract Line 28d, Column B from 17e, Column B, Page 2)	
15.	NET OPERATING EXPENDITURES  (Subtract Line 200, Column B. from 23, Column B. Baco 2)	

FEC Form 3P (Rev. 03/2011)	TAILED SUMMARY PAGE of Receipts	Page 3		
NAME OF COMMITEE (in Full)	or rieceipts	- Jage 6		
WAINTE OF GOINNITEE (III TUII) May to				
1 Canypassh 160	mustell.			
Report Covering the Period: From: DO ' DO'S To: DS ' DO'S				
I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date		
16. FEDERAL FUNDS (Itemize on Schedule A-P)	[ <u>// / / / / / / / / / / / / / / / / / /</u>			
CONTRIBUTIONS (other than loans) FROM:     (a) Individuals/Persons Other Than Political Committees				
(i) itemized(ii) unitemized				
(iii) Total contributions	7 140,00	1,40,90		
(b) Political Party Committees		<u> </u>		
(c) Other Political Committees				
(d) The Candidate	100000	2,00000		
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a), 17(b), 17(c) and 17(d))		2		
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES				
19. LOANS RECEIVED:				
(a) Loans Received From or Guaranteed by Candidate	0,000,00	, 10,000.00		
(b) Other Loans				
(c) TOTAL LOANS (Add 19(a) and 19(b)				
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.): (a) Operating				
(b) Fundraising				
(c) Legal and Accounting				
(d) TOTAL OFFSETS TO EXPENDITURES (Add 20(a), 20(b) and 20(c))				
21. OTHER RECEIPTS (Dividends, Interest, etc.)				
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d) and 21)	12,30400	12,304,00		

DETAILED SUMMARY PAGE			
		bursements and Contributed Items	Page 4
NA I	ME OF COMMITEE (in Full)	My Queste	, elle from
<u>                                    </u>	Cam part o	anni Hel	
	THE STATE OF THE S	· [7:27] · [89:37]	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Rep	ort Covering the Period: From:	To:	
	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
23.	OPERATING EXPENDITURES		<i></i>
24.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
25.	FUNDRAISING DISBURSEMENTS		
26.	EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS		
27.	LOAN REPAYMENTS MADE:		,
•	(a) Repayments of Loans made or Guaranteed by Candidate		
	(b) Other Repayments	- <i>D</i>	$\mathcal{O}$
	(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b))		
28.	REFUNDS OF CONTRIBUTIONS TO:		<u> </u>
	(a) Individuals/Persons Other Than Political Committees		0
	(b) Political Party Committees		
	(c) Other Political Committees	0	12
	(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b) and 28(c))		
29	OTHER DISBURSEMENTS		
30.	TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)		
	III. CONTRIBUTED ITEMS (Stock, Art Objects, Etc.)		
31.	ITEMS ON HAND TO BE LIQUIDATED (Attach List)		10

2016-06-08-03-00076911

FEC FORM 3P, Page 5 Federal Election Commission 999 E Street, N.W. Washington, D.C. 20463

### ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE

(Used Only by Primary Committees Receiving or Expecting To Receive Federal Funds)

Office Use Only

1. NAME OF COMMITTEE (in fu	II, type or print) 2. FEÇ IDENTJFICATIO	N NUMBER COO	5710192
Mary Hkm	water electron	Campais	
Cammilke			
ADDRESS (number and street)			
· · · · · · · · · · · · · · · · · · ·	10218, MSM Street	om Dove	<del></del>
· · · · · · · · · · · · · · · · · · ·	Gellersburg	1 1/1/10 1208	5751-1
<del></del>	CITY	STATE	ZIP CODE
3. NAME OF CANDIDATE	MART AKU	CHUBRITE	<del>-</del> <b>- - - - - - - - - -</b>
	ALLOCATION BY STAT	<u> </u>	-
STATE	ALLOCATION This Period	TOTAL ALLOCATION To	Date
Alabama			
Alaska		7 1 1 1	$\mathcal{O}$
Arizona		7	
Arkansas		47> 47> 47>	
California			
Colorado			
Connecticut			
Delaware		5 - 42 - 42 - A	$\mathcal{L}_{\mathcal{O}}$
District of Columbia	50000		0.00
. Florida	90000		000
Georgia	<u> </u>	C50	200
Hawaii			$\mathcal{O}$
ldaho			
Illinois	$\mathcal{O}$		$\mathcal{O}$

STATE	ALLOCATION This Period	TOTAL ALLOCATION To Date
Indiana		
lowa		
Kansas		
Kentucky	500,00	500,00
Louisiana	1,09000	1,090,00
Maine	0	
Maryland	500.00	50,000
Massachusetts		
Michigan		
Minnesota	<u> </u>	
Mississippi		
Missouri		0
Montana		
Nebraska	, O	
Nevada		
New Hampshire		
New Jersey		
New Mexico		
New York		
North Carolina		
North Dakota		
Ohio		
Oklahoma		
Oregon		
Pennsylvania		

STATE	ALLOCATION This Period	TOTAL ALLOCATION To Date
Rhode Island		
South Carolina		
South Dakota		
Tennessee	[	[00000
Texas	1,000.00	1,00000
Utah		
Vermont		
Virginia	500,00	500,00
Washington		
• West Virginia		
Wisconsin		
Wyoming		
Puerto Rico		
Guam		
Virgin Islands		
TOTALS	6,49,000	6,790,00

FEC	EXPENDITURES SUBJECT TO LIMIT  Form 3P (Used Only by Primary Committees Receiving or Expecting To Receive	Federal Funds) Page 4
	OF COMMITTEE (in Full) Many May Carafty	Camperon
	Camoul II ll	
Report	Covering the Period: From:	25 9. 2016
A.	OPERATING EXPENDITURES (Line 23, Column B)	
B.	OPERATING OFFSETS Line 20a, Column B)	
C.	CURRENT YEAR NET OPERATING EXPENDITURES (Subtract Line B from A)	<b>-</b>
D.	PRIOR YEAR(S) OPERATING EXPENDITURES	
E.	PRIOR YEAR(S) OPERATING OFFSETS	
F.	PRIOR YEAR(S) NET OPERATING EXPENDITURES (Subtract Line E from D)	
G.	FUNDRAISING DISBURSEMENTS (Line 25, Column B)	
Н.	OFFSETS TO FUNDRAISING DISBURSEMENTS (Line 20b, Column B)	
١.	CURRENT YEAR NET FUNDRAISING DISBURSEMENTS (Subtract Line H from G)	
J.	PRIOR YEAR(S) FUNDRAISING DISBURSEMENTS	
K.	PRIOR YEAR(S) FUNDRAISING DISBURSEMENTS OFFSETS	
L.	PRIOR YEAR(S) NET FUNDRAISING DISBURSEMENTS (Subtract Line K from J)	
М.	TOTAL NET FUNDRAISING DISBURSEMENTS (Add Lines I and L)	
. <b>N.</b>	20% EXEMPTION (20% of Overall Expenditure Limit)	
О.	TOTAL FUNDRAISING DISBURSEMENTS SUBJECT TO LIMIT (Subtract Line N from M)	<i>[</i>
P.	TOTAL EXPENDITURES SUBJECT TO LIMITATION (Add Lines C. F and O)	

7
ÓIG
~
06
0 8 -
03
000769
3715

SCHEDULE A-P ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)    16
Any information copied from such Reports and Statem or for commercial purposes, other than using the name	ents may not be sold or used by any and address of any political commit	person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)  Many AKU QUU	Jej electron	Campagen Committee
A. Full Name (Last, First, Middle Initial)	TET MARY A.	Date of Receipt
Mailing Address / O St	Stram Brille	2 25 27 2212
Gay pessing	MD JEST	2
FEC ID number of contributing federal political committee.	0.057.0192	Amount of Each Receipt this Period
State	Congras Wome	
Receipt For:  Primary General  Other (specify) ▼	tion Cycle-to <sup>L</sup> Date ▼	Memo Item
B. Full Name (Last, First, Middle Initial)	·	Date of Receipt
Mailing Address	. /	MIM / BIB / VIVIV
City	ate Zip Code	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
	upation	
Receipt For:  Primary General  Other (specify) ▼	tion Cycle-to-Date	Memo Item
C. Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M M M / B B / Y T Y T Y .
	ate Zip Cøde	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
	upation	
Receipt For:  Primary General  Other (specify)	tion Cycle-to-Date	Memo Item
Subtotal Of Receipts This Page (optional)		[ 199/1911]
Total This Period (last page this line number		
L	,,	FEC Schedule A-P (Form 3P) (Rev. 12/2015)

2016
6
8
03
00076916

SCHEDULE B-P ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE OF (check only one) 23 24 25 26 27a 27b 28a 28b 28c 29
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any post name and address of any political committee	person for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) May Alay Que	ufer election G	enperto Committe
A. Puar Park Middle Initial)	ny prav	Date of Disbursement
Mailing Address 028 M	11/5 tram Jove	
City Gayflesburg	3 State W Zip Code 2875	
Purpose of Disbursement Monly		Amount of Each Disbursement this Period
Candidate Name May Mky	Oychly Category/ Type	
Office Sought: House Dist	oursement For:	Memo Item
Sonate President	Primary General Other (specify) ▼	L mono non
State: District: Full Name (Last, First, Middle Initial)		+
В.		Date of Disbursement
Mailing Address		
City	State Zip Code	
Purpose of Disbursement	/	Amount of Work Dishurannan Ahia Basis
Candidate Name	Category/	Amount of Each Disbursement this Period
Office Sought: House Disl	Type oursement For:	Memo Item
Senate President	/Primary General  / Other (specify) ▼	L v Memo Rem
State: ( District: Full Name (Last, First, Middle Initial)		
c. /		Date of Disbursement
Mailing Address		M M / D D / Y Y Y
City	State Zip Code	
Purpose of Disbursement		1
Candidate Name	Category/	Amount of Each Disbursement this Period
Office Sought: / House Dis	Type Type	
State:  Senate President District:	Primary General Other (specify)	Memo Item
Subtotal Of Receipts This Page (option	nal)	
•		
Total This Period (last page this line no	imber only))	

2016
0
8
0
00076917

_				
SCHEDULE C-P LOANS	Use separate schedule(s) for each category of the Detailed Summary Page		PAGE FOR LINE NUMBER:	OF
NAME OF COMMITTEE (In Full)	D. for	la ken	(check only one)	19a 19b
LOAN SOURCE Full Name (Last, First,	, Middle Initial)	Se Se	no Item Election:	\ <u> </u>
Mailing Address City  City	State ZIP Coo	he "	Other (spec	ify) ▼
Gallherson	y hy	208	<u> </u>	
Original Amount of Loan	Cumulative Payment To D	ate Ø	Balance Outstanding at	Close of This Period
TERMS  Date Incurred	Date Due	Inte	rest Rate % (apr)	Secured:
List All Endorsers or Guarantors (i		No.		
1. Full Name (Last, Eirst, Middle/Initial	May A-	Name of Employ Occupation	State	
10218 MILLS	te ZIP Code	Amount Guaranteed	ngrass	
2. Full Name (Last, First, Middle Initial)	Mn 2087	Outstanding:	er	
Mailing Address		Occupation :	* .	
City		Guaranteed Outstanding:		
3. Full Name (Last, First/ Middle Initial)		Name of Employ	er	
Mailing Address	. /	Occupation  Amount		
City		Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)  Mailing Address		Name of Employ Occupation	er	
		Amount		·
City Sta	te ZIP Code	Guaranteed Outstanding:		
Subtotal Of Receipts This Page (option	onal)	▶[	• • • • • • • • • • • • • • • • • • •	
Total This Period (last page this line n		- [		
Carry outstanding balance only to LINE 3. S	Schedule D. for this line, If no Se	chedule D. carry fo	rward to appropriate line	of Summary

# 2016 - 06 - 08 - 07 - 00076018

Schedule C-P-1 Federal Election Commission 999 E Street, N.W. Washington, D.C. 20463

## LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary from Information found on Page \_\_\_\_ of Schedule C-P

NAME	OF COMMITTEE (in full, type or print) FEC IDENTIFICATION NUMBER CODS 70092
	my the Charley altre Compen Campan Jes
FULL N	NAME, MAILING ADDRESS AND ZIR CODE OF LENDING INSTITUTION (LENDER)
	Con Aller Guarden Juliania
1/4	CITY STATE ZIP CODE
NOMA	NT OF LOAN
DATE I	NCURRED OR ESTABLISHED ( ) ( ) DATE DUE ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (
A.	Has loan been restructured?  No Yes  If yes, date originally incurred:
В.	If line of credit:  Amount of this draw  / Total outstanding balance
<b>C</b> .	Are other parties secondarily liable for the debt incurred? (Endorsers and guarantors must be reported on Schedule C-P.)
	Are <b>ANY</b> of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?  No Yes
	If yes, specify:
	What is the value of this collateral:  Does the lender have a perfected security interest in it?  No Yes
E.	Are any future contributions or future receipts of interest income, or future receipts of public financing pledged as collateral for this loan? No Yes
	If yes, specify.
	What is the estimated value?
	A depository account must be established pursuant to  11 CFR 100.7(b)(11)(i)(B) and 100.8(b)(12)(i)(B). Date account established:
	Location of account:
	Date debtor authorized the Secretary of the U.S. Treasury to make direct deposits of public financing payments to the depository account:
F.	If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and demonstrate that it assures repayment.
	Madentoral Complete

	_	
G.	Туря	e or Print Name of Committee Treasurer
Н.	_	nature of Treasurer  Date  Dat
I.		BE SIGNED BY THE LENDING INSTITUTION:
	1.	To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.
	2.	The loan was made on terms and conditions (including interest rate) no more favorable at the time that those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.
	3.	This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth in 11 CFR 100.7(b)(11) and 100.8(b)(12) in making this loan.
	Typ L	The or Print Name of Authorized Representative
	<u>Ц</u>	Congress man
	Sig	SREG Cein Cein Cein Sp. 2016

2016 -
0
0 8 -
00076920

## SCHEDULE D-P DEBTS AND OBLIGATIONS (Excluding Loans)

(Use separate schedule(s) for each roumbered line) (check only one)

	numbered line) (check only one) 12
NAME OF COMMITTEE (In Full) MART AKU QUARTISTIBLE	CTION CAMPAGELLA
A. Full Name (Last First, Middle Initial) of Debtor or Creditor  Mailing Address  City State  City Graffees Middle Initial) of Debtor or Creditor  Mailing Address  Middle Initial) of Debtor or Creditor  Mailing Address  Middle Initial) of Debtor or Creditor  Mailing Address  Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Outstanding Balance Beginning This Period	
Amount Incurred This Period Payment This Period	Outstanding Balance at Close of This Period
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address  City State Zip Code	
Outstanding Balance Beginning This Period  Amount Incurred This Period Payment This Period	Outstanding Balance at Close of This Period
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address  City State Zip Code	
Outstanding Balance Beginning This Period  Amount Incurred This Period  Payment This Period	Outstanding Balance at Close of This Period
1) SUBTOTALS This Period This Page (optional)	
2) TOTALS This Period (last page this line number only)	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page of	
	Į.

2016 : 06 : 08 : 08 : 00076921

2016 JUN -8 AF

29hor

(3/2015)

## **Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS** The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt Hand Delivered 10/16 Postmarked Date of Receipt JSPS First Class Mail Postmarked (R/C) USPS Registered/Certified Postmarked **USPS** Priority Mail Postmarked **USPS Priority Mail Express** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery** Date of Receipt Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify):